

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          |        |          |
| FORMALITY REVIEW          | SA       | 1085   | 6/20     |
| RESPONSE FORMALITY REVIEW | CC       | 561114 | 8-17-01  |
|                           |          |        | 10-25-01 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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